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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/565,505			Filing Date 06 July, 2006			To be Mailed		
	Substitute	e for Form I with Form P	PTO-1360		Applicant(s) JAHROMI ET AL.						Page 1 of 1		
					* May be used for additional claims or amendn						ents		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT 05/11/2009		AFTER SEC. AMENDMENT		*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			CANC	ELED			51						
2			CANC	ELED			52						
3			CANC	ELED			53						
4			CANC	ELED			54						
5			CANC	ELED			55						
6			CANC	ELED			56						
7			CANC	ELED			57 58						
8 9			CANC CANC	ELED ELED			59						
10			CANC	ELED			60						
11			CANC	ELED			61						
12			CANC	ELED			62						
13			CANC	ELED			63						
14			CANC	ELED			64						
15			1				65						
16			1				66						
17				2			67						
18				2			68						
19				2			69						
20				2			70						
21 22				2			71 72						
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43							93						
44							94						
45 46							95 96						
46							96						
48							98						
49							99						
50							100						
Total			2				Total						
Indep							Indep						
Total				40			Total						
Depend							Depend						
Total Claims			42				Total Claims						

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